POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	66500	3-30
O.I.P.E. CLASSIFIER		10	3-28-00
FORMALITY REVIEW	M. M.	71624	5-17-00
RESPONSE FORMALITY REVIEW	M. M.	71624	7-20-00
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INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
−	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim Final	Original	Date										Claim Final	Original	Date										Claim Final	Original	Date									
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	2												52												102										
	3												53												103										
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	49												99												149										
	50												100												150										

If more than 150 claims or 10 actions
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